

<b>Index of Claims</b> 	Application No.	Applicant(s)
	09/889,203	BROWN, TRACEY
	Examiner	Art Unit
	Blessing M. Fubara	1615

<input checked="" type="checkbox"/> Rejected	<input type="checkbox"/> - (Through numeral) Cancelled	<input type="checkbox"/> N Non-Elected	<input type="checkbox"/> A Appeal
<input checked="" type="checkbox"/> = Allowed	<input type="checkbox"/> + Restricted	<input type="checkbox"/> I Interference	<input type="checkbox"/> O Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1	✓	51		101	
2	✓	52		102	
3	✓	53		103	
4	✓	54		104	
5	✓	55		105	
6	✓	56		106	
7	✓	57		107	
8	✓✓	58		108	
9	✓✓	59		109	
10		60		110	
11		61		111	
12		62		112	
13		63		113	
14		64		114	
15		65		115	
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18		68		118	
19		69		119	
20		70		120	
21		71		121	
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23		73		123	
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43		93		143	
44		94		144	
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49		99		149	
50		100		150	